IN THE SPECIFICATION:

Please amend the specification as follows:

At page 6, line 30, please replace "complet" with --completed--.

A clean copy of the paragraph is as follows:

The HMG antigens were previously measured as one of antinuclear antibodies of autoimmune diseases, not as an antigen to ANCA. Dennis J. S. et al. reported that the systemic lupus erythematosus patients have an anti-HMG-1 antibody at a radio of 10.3% and an anti-HMG-2 antibody at a ratio of 6.9%, and that the mixed connective-tissue disease patients and the rheumatoid arthritis patients have both antibodies at a ratio of 0% (Science 215, 1245-1247, 1982). Briolay J. et al. detected an anti-HMG-1 antibody and an anti-HMG-2 antibody by immunoblotting assay from the patients of systemic lupus erythematosus, rheumatoid arthritis and scleroderma, and reported that neither antibody has a diagnostic value (Autoimmunity, 2, 165-176, 1989). It is assumed they had problems in the purity of the HMG antigens, the techniques such as the ELISA assay and the immunoblotting assay, the state of the patients and the number of the subjects, but an invention relating to a diagnostic drug using HMG-1 and HMG-2 had not been completed at the time of the above-mentioned publications. There is a report that 39% of the antinuclear antibody-positive juvenile rheumatism patients are positive with respect to the anti-HMG-1 antibody and/or anti-HMG-2 antibody (Wittemann B. et al., Arthritis and Rheumatism 33, 1378-1383, 1990). The present inventors constructed as ELISA system using highly pure HMG-1 and HMG-2 and measured the percentage of the patients who were positive to these antigens regarding various diseases. As a result, a significant difference from the healthy (or normal) persons was found in ten diseases. Thus, the present invention has been completed.

At page 29, line 5, please replace "includes" with --include--.

A clean copy of the paragraph is as follows:

HMG-1 and HMG-2 are identified as antigens to pANCA. HMG-1 and HMG-2 were previously identified as intranuclear proteins and can possibly be antigens to an antibody which has conventionally been referred to as an antinuclear antibody. Accordingly, an anti-HMG-1 antibody and an anti-HMG-2 antibody can be detected in antinuclear antibody-positive diseases as well as in the pANCA-positive diseases. Since the ELISA assay is more sensitive than indirect immunofluorescence assay, it is possible to detect an anti-HMG-1 antibody and an anti-HMG-2 antibody in the diseases which have been considered to be ANCA-negative or to have a low ANCA-positive percentage. These diseases include, for example, Wegener's granulomatosis, leukoocyte destructive angiitis, Churs-Strauss syndrome, primary biliary cirrhosis, mixed connective-tissue disease, malignant tumor, amebic abscess, sweet disease, multiple sclerosis, Alzheimer's disease, Hashimoto's disease, hyperthyrea, erythroleukemia.

At page 30, line 14, please replace "detect" with --detected--.

A clean copy of the paragraph is as follows:

The present invention is also directed to a kit for performing measurement for an anti-HMG-1 antibody and an anti-HMG-2 antibody using ELISA. According to another method, the specificity to the disease can be detected by checking the response between peripheral blood lymphocyte and HMG-1 and HMG-2 of an autoimmune disease or an inflammatory disease patient. The disease can be detected by measuring whether or not T lymphocyte proliferates in response to HMG-1, HMG-2 or a synthetic peptide thereof which is immuno-responsive, or by measuring whether or not γ-interferon is produced by macrophage in the same assay.